

■ Lump Sum Advance or Redemption Settlement

In certain cases the bureau may allow you to draw all or part of your compensation in one sum. This is possible by one of the following methods:

- A Lump Sum Advance Payment: pre-payment of all or part of the present value of the employer's established liability for compensation. The bureau may order such a payment on your application for advance payment even if your employer objects to such payment.
- A Redemption of Liability: complete and final settlement of your compensation claim by payment of a single sum to you by your employer. You are not required to accept such a settlement. A redemption is possible only after it is approved by the bureau and becomes final 15 days after such approval.

YOUR RESPONSIBILITIES

You must:

- notify your employer or insurance carrier of any wages earned during the benefit period. Michigan law does not permit the payment of weekly workers' compensation benefits to persons who are employed and receiving wages equal to or greater than wages earned on the date of injury except for specific loss or permanent and total disability. Partial wage loss benefits may however be paid if you are working and receiving wages less than those you received when you were injured. If you are receiving weekly wage loss benefits and are currently employed or return to work, you must notify your previous employer or their workers' compensation insurance carrier of your current employer's name and address.
- submit to reasonable periodic medical examination if required by your employer or insurance carrier.
- cooperate with reasonable rehabilitation efforts directed toward assisting you to return to appropriate competitive employment.
- accept a valid offer of employment from your previous employer, another employer, or through the State of Michigan Unemployment Agency (formerly Michigan Employment Security Commission).

■ Unemployment Compensation

No person may receive full workers' compensation benefits and unemployment insurance benefits for the same period of time from the same employer.

■ Retired Persons

Retirees are not presumed to have a loss of wage earning capacity unless there is a preponderance of evidence to the contrary.

■ Prompt Reporting

Details of work-related accidents or disease should be reported as soon as possible to your employer, supervisors or other persons in charge. Compensation shall be paid for disability extending beyond seven consecutive days not including the date of injury.

Failure to give notice of an accident or injury within three months may result in loss of rights to compensation.

When a hernia is caused by performance of work without a specific incident or accident to account for it, it is considered an occupational disease. This type of hernia must clearly be recent in origin and result from a strain arising out of and in the course of the employment, and it must be promptly reported to the employer.

Detroit

Cadillac Place
3026 West Grand Boulevard
Suite 3-700
Detroit, MI 48202
(313) 456-3650

Flint

Bristol West Center
G-1388 W. Bristol Rd. 48507
(810) 760-2618

Kalamazoo

940 N. 10th Street 49009
(269) 544-4440

Mt. Clemens

Old County Bldg 10th Fl.
10 N. Main 48043
(586) 463-6577

Escanaba

State Office Building
305 Ludington 49829
(906) 786-2081

Grand Rapids

2942 Fuller NE
49505-3488
(616) 447-2680

Lansing Area

2501 Woodlake Circle
Okemos 48864
(517) 241-9393

Pontiac

Oakland Towne Center
Suite 1310
28 N. Saginaw 48342
(248) 334-2497

Saginaw

State Office Building
411-K E. Genesee 48607
(989) 758-1768

Toll Free: (888) 396-5041

Web Site: www.michigan.gov/bwuc

TTY# in Lansing (517) 322-5987

A Summary of Your Rights and Responsibilities

under

Workers' Disability

Compensation



Department of
Consumer & Industry Services

"Serving Michigan, Serving You"

February 2003

The Department of Consumer & Industry Services will not discriminate against any individual or group because of race, sex, religion, age, national origin, color, marital status, disability, or political beliefs. If you need assistance with reading, writing, hearing, etc., under the Americans with Disabilities Act, you may make your needs known to this agency.

Authority: PA 317 of 1969, as amended.
Copies: 10,000; Total Cost: \$361; Unit Cost: \$0.036

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Workers' Disability Compensation is an employee benefit established in 1912 by the Michigan Legislature. It is administered by the Michigan Department of Consumer & Industry Services, Bureau of Workers' Disability Compensation ("the bureau") and covers most employees.

Compensation is provided for disability or death as a result of a work-related injury or disease, without regard to who may be at fault. Benefits are paid by employers (either directly or through their insurance companies) and should not be confused with unemployment compensation, hospital, health, or accident insurance. Payments are not made by the bureau or the State of Michigan.

If you don't know whether your employer has compensation insurance, ask them. You can also find out by writing the bureau at one of the addresses on the back cover of this pamphlet.

The right to recovery of benefits as provided in the Workers' Disability Compensation Act is your exclusive remedy against your employer for work-related injuries or diseases. Employees do not have the right to sue employers for benefits not provided for in the Act.

This pamphlet only summarizes your rights and responsibilities under the Workers' Disability Compensation Act. Your employer and/or their insurance carrier should be consulted for additional information and clarification. The bureau can also assist you.

YOUR RIGHTS

■ Medical Care

You are entitled to reasonable medical care for work-related injuries or diseases. This includes medical, surgical, nursing and hospital services, and, under certain conditions, dental care, crutches and such artificial appliances as limbs, eyes, teeth, eyeglasses and hearing aids.

Employers or their insurance companies are required by law to provide these services. Ten days after beginning medical care provided by an employer, you may elect to see a doctor of your choice. If you do, you must give your carrier notice of intent and the name of the physician.

If you receive treatment from a physician of your choice, you shall obtain and promptly furnish a report to the employer.

If the employer or the insurance company shows good cause why you should not be allowed to continue treatment with a second physician, the bureau, following a hearing, may order you to discontinue that treatment.

If your employer refuses to provide medical care, ask the bureau to find out why.

The health care services rules prohibit a provider from billing an employee for treatment of a covered work-related injury or illness. The carrier shall request the employee to notify the carrier if the provider bills the employee.

■ Wage Loss Benefits

You are entitled to weekly compensation benefits, which may be claimed as long as a disability and wage loss continue. Specific amounts and calculations depend on the date and type of your injury.

In the event you return to work at a job which pays less than you were earning at the time of injury, and the reason is because you are still unable to work at your previous job, you are entitled to partial compensation benefits.

If you lose an eye, finger, arm or other body member you are entitled to a specific amount for a prescribed number of weeks. If at the end of the specific loss period you still have a wage loss due to the injury, you may be entitled to further compensation.

■ Prompt Payment

Prompt payment of benefits is required by law. The first payment is due on the 14th day after the employer has notice or knowledge of a disability or death, and all compensation accrued will be paid weekly.

If payments are late, contact your employer or their insurance company. If the matter is not resolved to your satisfaction, contact the bureau.

■ Coordination of Benefits

If you are injured and are eligible for, or are receiving, old-age Social Security benefits, pension or retirement benefits, or benefits under a wage continuation plan, self-insurance plan, or disability insurance policy paid for by the employer, there will be an offset or coordination of benefits. This does not apply to specific losses such as fingers, eyes, arms, and legs, nor does it apply to benefits received from disability insurance benefit payments under Social Security.

■ More Than One Employer

If you work for more than one employer, you get credit for all wages reported to the Internal Revenue Service in employment covered under the Workers' Disability Compensation Act (for benefit computation purposes). Also, the liable employer must pay the total benefit. If the liable employer pays 80 percent or less of your total wages, they still pay the total benefit and are later reimbursed (by the Second Injury Fund) for the amount over their percentage of exposure.

■ Vocational Rehabilitation

The goal of vocational rehabilitation is to assist you to return to appropriate employment as soon as reasonably possible. Return to work with the former employer is emphasized, and direct job placement will be provided if you are employable without retraining.

If you are unable to perform work for which you had previous training or experience, you are entitled to vocational rehabilitation which includes counseling, guidance, specialized job placement or short-term retraining.

Vocational rehabilitation may be provided by your employer or carrier, the state rehabilitation agency, or a private rehabilitation facility.

■ Vocational Rehabilitation Hearings

If you and your employer or carrier cannot agree upon a rehabilitation program, you have the right to a vocational rehabilitation hearing. If either you or your employer disagrees with a decision of the bureau, you may exercise the right to appeal.

■ Hearing/Mediation/Arbitration

If you disagree with any decision of your employer or their carrier, you may file an application for hearing. The application form can be obtained from the bureau at any of the addresses listed on the back cover of this pamphlet.

Certain types of contested cases are entitled to **mediation**:

- If your claim concerns a definite period of time and you have returned to work.
- If the claim is for medical benefits only.
- If you are not represented by an attorney.
- If the bureau determines that your claim may be settled by mediation.

If your claim is not resolved by mediation and the disputed amount is \$2,000 or less, your case may be heard in the Small Claims Division. If the amount is more than \$2,000 your case will be heard before a magistrate.

You are entitled to a hearing before an **arbitrator** if both you and your employer or carrier agree and request such hearing in writing.